

ALLOWANCE OF VOUCHERS

I HEREBY CERTIFY THAT EACH OF THE ABOVE LISTED VOUCHERS AND THE INVOICES, OR BILLS ATTACHED THERETO,
ARE TRUE AND CORRECT AND I HAVE AUDITED SAME IN ACCORDANCE WITH IC 5-11-10-1.6.

October 9, 2009

JUDITH C. RHODES
FISCAL OFFICER

WE HAVE EXAMINED THE VOUCHERS LISTED ON THE FOREGOING ACCOUNTS PAYABLE VOUCHER REGISTER, CONSISTING OF
PAGES, AND EXCEPT FOR VOUCHERS NOT ALLOWED AS SHOWN ON THE REGISTER SUCH VOUCHERS ARE HEREBY ALLOWED

IN THE TOTAL AMOUNT OF \$ 1,111.50 . DATED THIS 9th DAY OF October 2009.

APPROVED BY STATE BOARD OF ACCOUNTS IN 2001 FOR CITY OF WEST LAFAYETTE

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ACCOUNTS PAYABLE VOUCHER REGISTER

BDA45/TEMP2
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CITY OF WEST LAFAYETTE

FOR THE PERIOD OF 10/09/09 - 10/09/09

CHECK	VOUCHER	VENDOR NAME	DUE DATE							AMOUNT
PO #	INVOICE NUMBER	DESCRIPTION	FND	PROGRAM	OBJECT	CC	ACCOUNT TITLE	VOUCHER AMOUNT	ALLOWED	
2226	2226	CYNTHIA MARION, FLEX ACCOUNT	10/09/09							
	FLEX PLAN	FLEX PLAN MEDICAL	811	811.00	.00	0	FLEXIBLE PLAN MEDICAL	1,111.50	1,111.50	
							CHECK AMOUNT	1,111.50		
							PRE-WRITTEN TOTAL	1,111.50		
							GRAND TOTAL.....	1,111.50		

10/09/09
2:54:41

FUND SUMMARY

BDA45/TEMP2
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CITY OF WEST LAFAYETTE

FUND	DESCRIPTION	VOUCHER TOTAL
811	FLEXIBLE PLAN MEDICAL	1,111.50
	GRAND TOTAL	1,111.50